

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 175448	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 12/04/2013
NAME OF PROVIDER OR SUPPLIER ABERDEEN VILLAGE			STREET ADDRESS, CITY, STATE, ZIP CODE 17500 WEST 119TH STREET OLATHE, KS 66061		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
S 000	INITIAL COMMENTS The following citations represent the findings of a Licensure Resurvey.	S 000			
S3080 SS=D	<p>26-41-201 (a) (b) Functional Capacity Screen on Admission</p> <p>a) On or before each individual ' s admission to an assisted living facility or residential health care facility, a licensed nurse, a licensed social worker, or the administrator or operator shall conduct a screening to determine the individual ' s functional capacity and shall record all findings on a screening form specified by the department. The administrator or operator may integrate the department ' s screening form into a form developed by the facility, which shall include each element and definition specified by the department.</p> <p>(b) A licensed nurse shall assess any resident whose functional capacity screening indicates the need for health care services.</p> <p>This Requirement is not met as evidenced by: K.A.R. 26-41-201 (a)</p> <p>The facility reported a census of 37 residents and the sample was 3. Based on observation, record review, and interview the facility failed to screen the residents functional capacity as required for 1 resident (#1) of 3 residents sampled.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - Resident #1's admission date was 11/19/12. Record lacked a Functional Capacity Screen (FCS) completed on admission for this resident. <p>Observation of the resident on 11/25/13 at 10:03</p>	S3080			

If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S3080	Continued From Page 1 A.M. revealed the resident sat in a facility chair in the front lobby waiting to have his/her hair done. Interview with administrative licensed staff C on 11/26/13 at 8:04 A.M. stated he/she was unable to find an admission FCS for this resident. He/she acknowledged the need to have the screen completed before the admission. The facility failed to complete a Functional Capacity Screen for this resident on admission.	S3080			
S3081 SS=D	26-41-201 (c) Functional Capacity Screen Reassessment (c) Designated facility staff shall conduct a screening to determine each resident 's functional capacity according to the following requirements: (1) At least once every 365 days; (2) following any significant change in condition as defined in K.A.R. 26-39-100; and (3) at least quarterly if the resident receives assistance with eating from a paid nutrition assistant. This Requirement is not met as evidenced by: K.A.R. 26-41-202 (d) The facility reported a census of 37 residents and the sample was 3. Based on observation,. record review, and interview the facility failed to update and revise the Negotiated Service Agreement (NSA) annually as required for 1 resident (#1) of 3 residents sampled. Findings included: - Residents's #1 admission date was 11/19/12.	S3081			

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S3081	Continued From Page 2 The NSA was dated 11/19/12. The NSA lacked evidence the facility reviewed the NSA annually. Observation of the resident on 11/25/13 at 10:03 A.M. revealed the resident sat in facility chair in the front lobby waiting to have his/her hair done. Interview with administrative staff C on 11/26/13 at 9:30 A.M. stated staff should review the NSA every 365 days. The facility failed to update and revise the NSA annually for this resident.	S3081			
S3085 SS=D	26-41-202 (a) Negotiated Service Agreement (a) The administrator or operator of each assisted living facility or residential health care facility shall ensure the development of a written negotiated service agreement for each resident, based on the resident ' s functional capacity screening, service needs, and preferences, in collaboration with the resident or the resident ' s legal representative, the case manager, and, if agreed to by the resident or the resident ' s legal representative, the resident ' s family. The negotiated service agreement shall provide the following information: (1) A description of the services the resident will receive; (2) identification of the provider of each service; and (3) identification of each party responsible for payment if outside resources provide a service. This Requirement is not met as evidenced by: K.A.R. 26-41-212 (a)	S3085			

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S3085	<p>Continued From Page 3</p> <p>The facility reported a census of 37 residents and the sample was 3. Based on observation, record review and interview the facility failed to amend the Negotiated Service Agreement (NSA) to reflect the changes in care regarding therapy for 2 (#1, #3) of 3 residents sampled.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - Resident #1 had an admission date and NSA date of 11/19/12. The resident received occupational therapy from 8/27/13 to 10/1/13. The NSA did not reflect the changes in implementing therapy. <p>Interview with administrative licensed staff C on 11/26/13 at 9:30 A.M. stated he/she was not aware the NSA needed to be amended.</p> <p>Observation of the resident on 11/25/13 at 10:03 A.M. revealed the resident sat in facility chair in the front lobby waiting to have his/her hair done.</p> <p>The facility failed to amend the NSA to reflect the change in therapy for this resident.</p> <ul style="list-style-type: none"> - Resident #3 had an admission date and NSA date of 7/1/13. The resident received occupational therapy from 3/18/13 to 4/14/13. The NSA did not reflect the changes in implementing therapy. <p>Interview with administrative licensed staff C on 11/26/13 at 9:30 A.M. stated he/she was not aware the NSA needed to be amended.</p> <p>The facility failed to amend the NSA to reflect the change in therapy for this resident.</p>	S3085			

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S3165	Continued From Page 4	S3165			
S3165 SS=D	<p>26-41-204 (d) Health Care Services</p> <p>(d) The negotiated service agreement shall contain a description of the health care services to be provided and the name of the licensed nurse responsible for the implementation and supervision of the plan.</p> <p>This Requirement is not met as evidenced by: K.A.R. 26-41-204 (d)</p> <p>The facility reported a census of 37 residents and the sample was 3. Based on observation, record review and interview, the facility failed to provide a name of the licensed nurse responsible for the implementation and supervision of the nursing plan for 2 (#2, #3) of 3 residents sampled.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - Resident #2's admission date was 6/20/13, The Negotiated Service Agreement (NSA) completed 6/18/13 lacked documentation of the nurse responsible for the care of this resident. <p>Interview with administrative licensed nurse C on 11/26/13 at 9:30 A.M. stated the facility was currently in between nurses in this position. The nurse responsible would be one of the nurses from the Skilled side of the facility.</p> <p>The facility failed to provide a name of the nurse responsible for the implementation and supervision of the residents' plan of care.</p> <ul style="list-style-type: none"> - Resident #3's admission date and Negotiated Service Agreement (NSA) was dated 7/1/13. The NSA lacked documentation of the nurse responsible for the care of this resident. 	S3165			

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S3165	<p>Continued From Page 5</p> <p>Interview with administrative licensed nurse C on 11/26/13 at 9:30 A.M. stated the facility was currently in between nurses in this position. The nurse responsible would be one of the nurses from the Skilled side of the facility.</p> <p>Observation on 11/25/13 at 2:30 P.M. revealed the resident walked independently with walker while conversed with family member.</p> <p>The facility failed to provide a name of the nurse responsible for the implementation and supervision of the residents' plan of care.</p>	S3165			

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